	OIPE		•		NSMITTAL		/	
Complete and send this form, together with applicable fee(s), to: Mail JUN 0 6 2005 or Fax				<u>Fax</u>	Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 (703) 746-4000			
maintenance lee notificat			E FEE and ders and noting a specifying a	PUBLIC ification a new co	ATION FEE (if requi of maintenance fees w orrespondence address;	ired). Blocks I through 5 sill be mailed to the current and/or (b) indicating a sep	should be completed where correspondence address as arate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of address) 7590 04/26/2005					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
Scully, Scott, Murphy & Presser 400 Garden City Plaza Garden City, NY 11530 6/07/2005 HGUTEMA2 00000040 10091893					Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.			
1 50-1501	1400.00 OP				_Thomas Spi	nelli ((Depositor's name)	
2 FC:1504 3 FC:8001	300.00 OP 3.00 OP				June 1, 20	005	(Signature)	
APPLICATION NO.	FILING DATE	FIRST NAMED INVE			TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/091,893 03/06/2002 Kiyotomi Ogawa 15345 9180 TITLE OF INVENTION: ENDOSCOPE APPARATUS							9180	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE		TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400)	1	\$300	\$1700	07/26/2005	
EX	ART UNIT		CL	ASS-SUBCLASS				
PHILIPPE, GIMS S		2613		!	348-065000	•		
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AT	ND RESIDENCE DATA TO B	E PRINTED ON T	HE PATENT	T (print o	r tyne)			

•	1				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED OF	N THE PATENT (print or type)				
PLEASE NOTE: Unless an assignee is identified below, no assign recordation as set forth in 37 CFR 3.11. Completion of this form is N	ee data will appear on the patent. If an assignee is identified below, the document has been filed for IOT a substitute for filing an assignment.				
(A) NAME OF ASSIGNEE OLYMPUS CORPORATION	(B) RESIDENCE: (CITY and STATE OR COUNTRY) TOKYO, JAPAN				
Please check the appropriate assignee category or categories (will not be	printed on the patent):				
	4b. Payment of Fee(s):				
☑ Issue Fee	A check in the amount of the fee(s) is enclosed.				
Publication Fee (No small entity discount permitted)	Payment by credit card. Form PTO-2038 is attached.				
Advance Order - # of Copies 1 COPY	The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 19-1013/SSMP (enclose an extra copy of this form).				
5. Change in Entity Status (from status indicated above)					
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.	☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).				
The Director of the USPTO is requested to apply the Issue Fee and Publi NOTE: The Issue Fee and Publication Fee (if required) will not be accept interest as shown by the records of the United States Patent and Tradema	cation Fee (if any) or to re-apply any previously paid issue fee to the application identified above. ted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in rk Office.				
Authorized Signature	Date				
Typed or printed name Thomas Spinelli	Registration No. 39,533				
This collection of information is required by 27 CER 1 211. The information	tion is required to obtain an extring how 64 hours with the file of the distriction of the state				

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.